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CURRENT CORRESPONDEN	ICE ADDRESS (Note: Use BI	ock 1 for any change of addres	Note: A certificate of mailing can only be used for domestic mailings of the				
5073 7590 09/15/2008				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot he used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
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APPLICATION NO.	PPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/850,384		Thang C. Nguye	hang C. Nguyen 062891.0563 2723				
TITLE OF INVENTION: SHARED DISTRIBUTED MEDIA RESOURCES IN A COMMUNICATION NETWORK							
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE I	DUE PREV. PAID ISSU	TE FEE TOTAL FEE(S) DUI		
nonprovisional	NO	\$1440	\$0	\$0	\$1440	12/15/2008	
EXAMINER		ART UNIT	CLASS-SUBCLAS	3			
BATES, KEVIN T 2153			709-227000	9-227000			
 Change of corresponden CFR 1.363). 	ce address or indicatio	n of "Fee Address" (37		2. For printing on the patent front page, list (1) the sames of the to 2 resistant enterty effective I Baker Botts L.L.P.			
Change of correspon	dence address (or Cha	nge of Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
Address form PTO/SB/	122) attached.		(2) the name of a single firm (having as a member a 2				
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filting an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Cisco Technology, Inc. San Jose, California							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🖵 Government							
				Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)			
Issue Fee				A check is enclosed.			
Publication Fee (No Advance Order - # o		ermitted)		☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (12—0.384—(enclose an extra copy of this form).			
			overpayment, to	Deposit Account Numb	xr 02-0384 (enclose	an extra copy of this form).	
 Change in Entity Statu a. Applicant claims 5 	SMALL ENTITY/syntu	See 37/CFR 1.27.			LL ENTITY status. See 37		
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Authorized Signature _	///////				12./10/08		
Typed or printed name Bradley P. Williams				Registration	No. 40,227		
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